



The Commonwealth of Massachusetts
State Board of Retirement
One Ashburton Place, Boston, MA 02108-1607

Timothy P. Cahill
Treasurer and Receiver General
Chairman

ROOM 1219
(617) 367-7770
1-800-392-6014

GROUP CLASSIFICATION QUESTIONNAIRE

Name

Social Security No.

Address

Please state your current job title and employing agency.

Please indicate the dates of employment in your current position and location. (If your position has changed within the last twelve months, please describe the circumstances of that change and your position and job duties immediately prior to that change.)

Please provide a **current** description of your daily responsibilities. (In this description please include information such as, whether you work on a particular shift; whether you supervise or are assigned other employees, and if so, how many; who directly supervises you. Also, if you work with a specific population of individuals, such as children, the mentally ill, medically infirmed, prisoners or parolees, please describe the exact nature of your responsibilities on a daily basis. Please attach information responsive to this request, if this space is not sufficient.)

Please attach any additional relevant information you wish to provide such as a current job description (F-30), your most recent Employee Performance Review Statement (EPRS), etc.

I hereby certify under the penalties of perjury that the above information is true and accurate.

Dated

Member

Dated

Employing Agency